

## **IDAHO STATE TREASURER'S OFFICE**

# Electronic Remittance Guide

Department of Lands
Public Health District #4
Health and Welfare
DEQ

STATE OF IDAHO Office of the State Treasurer Angela Bonaminio, ACH Coordinator Phone: (208) 332-2998

Fax: (208) 332-2960

### GENERAL INFORMATION

Since July 1, 1998, the State of Idaho has required all tax payments of \$100,000 or more to be paid by electronic funds transfer, or EFT (Idaho Code §67-2026). In July 1997, this law was amended to include all payments of \$100,000 or more, and to require that such payments be made through the Automated Clearing House system:

#### 67-2026. Taxes, Fees and other amounts to be paid by electronic funds transfer --

Exception: (1) Except as allowed in subsection (3) of this section, all taxes and additional amounts of interest, penalty or fees payable together with taxes and all other fees and amounts which are payable to the state must be paid by electronic funds transfer whenever the amount paid or payable is one hundred thousand dollars (\$100,000) or greater. Whenever the payment of taxes is required to be made by electronic funds transfer under this section and the due date falls on a Saturday, Sunday, or legal holiday, the payment may be made on the first business day thereafter.

- (2) All electronic funds transfers to the state, whether or not required by this section, shall be made through the automated clearing house system (ACH) operated by the federal reserve by the ACH debit or ACH credit method and shall include related addenda or messages necessary for:
  - (a) Coordinating the filing of tax returns or other reports with the payment of taxes and all other fees and amounts by electronic funds transfer; and
  - (b) Ensuring the proper receipt and crediting of the payment.
- (3) No individual shall be required to make payment to the state by electronic funds transfer of any taxes, fees or amounts payable to the state, regardless of amount, when such taxes, fees or amounts are payable pursuant to section **63-3024**, Idaho Code. However, if an individual elects to make payment by electronic funds transfer of income tax or any fees and amounts associated with income tax liability, such electronic funds transfer shall adhere to the provisions for electronic funds transfer as specified in this section. For the purposes of this subsection (3), the definition of "individual" shall be as the term is defined in section **63-3008**, Idaho Code.
  - (4) The state treasurer shall adopt procedures necessary to implement the provisions of this section.

The ACH system is a nationwide network used by the Federal Reserve to exchange and settle financial transactions. EFT is a safe and efficient procedure for transferring payments into the state treasury, helping to ensure that payments are received by their due dates.

Please follow this guide to implement EFT by the Automated Clearing House method for your payments of \$100,000 or greater. The State Treasurer's Office also encourages use of EFT/ACH for payments less than \$100,000, although the law does not require it.

State of Idaho offers two ACH/ EFT methods:

- 1. Automated Clearing House Debit (ACH Debit)
- 2. Automated Clearing House Credit (ACH Credit)

Both methods require enrollment and acceptance by the Idaho State Treasurer's Office.

If you change financial institutions or wish to change your method of transfer, please submit a new EFT authorization to Angela Bonaminio, ACH Coordinator, State Treasurer's Office, PO Box 83720, Boise, ID 83720-0091. New enrollment forms can be obtained by calling the Idaho State Treasurer's Office at 208-332-2998.

## **ACH DEBIT INSTRUCTIONS**

- ➤ Send a completed authorization form (<u>page 6</u>) and a voided check to Angela Bonaminio at the Idaho State Treasurer's Office. This information will be forwarded to govONE Solutions, the debit processor for ACH/EFT payments. *Allow at least 30 days prior to the first payment due date for initial set-up and approval.* You will receive calling instructions from govONE Solutions.
- ➤ The system is available to you 24 hours a day, 7 days a week, including weekends and holidays.
- ➤ To be considered timely, calls *must be completed* by **3:00 PM Mountain Time / 2:00 PM Pacific time** at least one business day before the payment due date.
- ➤ GovONE Solutions has a warehousing feature. This feature allows you to call up to 45 days in advance of the date you would like your bank account charged and your payment credited to the State Treasurer's bank account. Please note: the date you charge your account must be a valid bank business date.

Payments made by ACH/EFT must be in the State Treasurer's bank account on or before the due date. **Exception:** When a payment due date falls on a weekend or legal holiday the payment is due the next business day.

## **ACH CREDIT INSTRUCTIONS**

- ➤ Contact your bank to determine what ACH origination services it offers.
- > Send a completed authorization form (<u>page 6</u>) to Angela Bonaminio at the Idaho State Treasurer's Office. This is for our database purposes only. You will not receive any instructions other than those printed here. *Allow your financial institution at least 30 days prior to the first payment due date for initial set-up.*
- ➤ Your bank must transmit your payment to the State Treasurer's bank account using the RMT addenda record. See <u>page</u> 3 for RMT conventions. Contact the appropriate Idaho State Agency to receive the bank account information (see page 4).
- At least one business day prior to the payment due date, contact your bank to initiate transmission of credit and addenda information to the State Treasurer's account.

Payments made by ACH/EFT must be in the State Treasurer's bank account on or before the due date. **Exception:** When a payment due date falls on a weekend or legal holiday the payment is due the next business day.

STATE OF IDAHO

**ACH CCD + File - EXAMPLE** 

The ABC Corp. pays \$150,000 to the Dept of Lands (agency #320). ABC's Federal Employer ID number (EIN) is 432154321; the Invoice Number is 1234567890; the Invoice Date is 5/24/01.

Detail Record (Record	Detail Record (Record 6)				
Position	Description	Value			
1	Record Type	6			
2-3	Trans Type	22			
4-11	Receiving DFI ABA	Receiver's Bank			
12	ABA Check Digit	Bank			
13-29	DFI-Account Number	Receiver's Account			
30-39	Payment Amount	15000000			
40-54	Federal Employer ID # (EIN) + 3 Digit Agency Code	432154321 <u>3</u> <u>2</u> <u>0</u>			
55-76	Receiving Company Name	Idaho State Agency Name			
77-78	Space-Filled				
79	Addenda Indicator	1			
80-94	ACH Trace Number	#######################################			

RMT Addendum (Record 7)				
Position	Description	Value		
1	Record Type	7		
2-3	Addenda Type	05		
4-6	Segment Identifier	RMT		
7	Separator	*		
8-9	Invoice Data Qualifier	IV		
10	Separator	*		
11-28	Reference/Invoice Number (R01)	123456789012345678		
29	Separator	*		
30-39	Amount Paid (R03)	15000000		
40	Separator	*		
41	Separator	*		
42	Separator	*		
43	Separator	*		
44	Separator	*		
45	Separator	*		
46	Separator	*		
47-52	Invoice Date in YYMMDD format (R10)	010524		
53	Data Terminator	\		
54-83	Filler	Spaces		
84-87	Addenda Sequence Number	0001		
88-94	Entry Detail Sequence Number	Same as 6-Rec		

*Example of formatted State of Idaho RMT addenda record:* 705RMT\*IV\*123456789012345678\*15000000\*\*\*\*\*\*\*040631\

## **IDAHO AGENCY PAYMENT CONTACT LIST**

Agency	Contact Person	Mailing Address
Health and Welfare Agency code: 270	Phone: (208) 334-4999 Fax: (208) 334-5694	Attn: Fiscal Helpline PO Box 83720 Boise, Idaho 83720-0036
<b>DEQ</b> Agency code: 245	Claudia Clark Phone: (208) 373-0172 Fax: (208) 373-0315	Attn: Claudia Clark 1410 North Hilton Boise, Idaho 83706-1255
<b>Dept. of Lands</b> Agency code: 320	Carol Spoor Phone: (208) 334-0258 Fax: (208) 334-2339	Attn: Accounts Receivable 954 W. Jefferson Boise, Idaho 83720-0050
Public Health District 4 Agency code: 954	Julia Kolb Phone: (208) 327-8594 Fax: (208) 327-8500	Attn: Accounting 707 N. Armstrong PI Boise, Idaho 83704

STATE OF IDAHO
REMITTANCE ENROLLMENT FORM
INSTRUCTIONS

This is to be used for first-time enrollments as well as for modifications to a previous enrollment.

You must check one of the two boxes that apply.

ADD NEW ENROLLMENT: For all new companies registering for the first time on the

program.

MODIFY ORIGINAL ENROLLMENT: Used when a modification must be made to any of the

information on file, e.g., new bank account number, new

address, new phone number, etc.

STATE OF IDAHO AGENCIES: Indicate the State of Idaho Agency to which you will be

Remitting payments. Please check all that apply.

METHOD: Indicate the method that will be used to remit payments: ACH

DEBIT or ACH CREDIT.

FEDERAL EMPLOYER ID # (EIN): This is the 9-digit ID you will use for reporting.

COMPANY / CONTACT /ADDRESS: Using the allowed space, print/type the company's name as it

should appear for ACH presentation to the financial institution and to the State of Idaho, the contact's name and the address to be used for all confirmation and instruction material mailings.

PRIMARY PHONE NUMBER: Indicate the contact's telephone number should a follow-up call

be necessary to confirm the information you have provided on

the form

**ACH CREDIT METHOD: STOP HERE.** . Send the original form to the appropriate agency along with a written request for the banking information. (Address on page 4). Keep a copy for your files.

ACH DEBIT METHOD: PLEASE CONTINUE. Fill in the following.

TRANSIT ROUTING NUMBER: The 9-digit routing number used to identify the financial

(ABA NUMBER) institution where the company maintains its account.

BANK ACCOUNT NUMBER: The number of the company's financial institution account used

to make the payment.

CHECKING / SAVINGS / OTHER: Indicate whether the bank account is a checking account or a

savings account. If it is any other type, please explain in the

space provided.

**ACH Debit Method ONLY:** 

1. Include a voided check or a letter from your financial institution in order to verify the American Bank Association Number and the Bank Account Number.

2. Sign and date the attached form in the area noted.

Return the completed form to appropriate state agency (addresses listed on page 4).



#### **EFT Enrollment Form** – *Please print or type.*

ADD NEW E	INKOLLIVIENI 🔝	OR BAN	NKING CHANGE [	
EFT Tax Payment Type availd	able. Please check all that ap		nd Welfare (agency nt of Lands (agency DEQ (agency	code 320)
		Public Hea	lth Dist. #4 (agency	
Indicate which method you wi	ill use in sending your paym	ent.		
Automated Clearing House	se (ACH) Debit 🗌	Automated (	Clearing House (AC	CH) Credit 🗌
Federal Employer ID No. (9	9):			
Company Name (25):		 ·	·	
Contact (25):				_
Address (25):				_
City (15):		State (	(2):	
	Prir	nary Pnone: (		
Zip:		nly)		
Financial Institution Information Informat	rmation (Debit method of System, please include a voic ciation Number and the Bank	led check or a letter fr Account Number.	rom your financial ins	titution in order
Financial Institution Information Informat	rmation (Debit method of System, please include a voic ciation Number and the Bank	led check or a letter fr Account Number.	om your financial ins	titution in order (
Financial Institution Information Information of the ACH Debit verify the American Bank Assource (Routing) / ABA Notes	rmation ( <i>Debit method of</i> System, please include a voice ciation Number and the Bank umber (9):	led check or a letter fi Account Number.		titution in order
Financial Institution Information Information of the ACH Debit verify the American Bank Assource (Routing) / ABA Notes	rmation ( <i>Debit method of</i> System, please include a voice ciation Number and the Bank umber (9):	led check or a letter fi Account Number.		
Financial Institution Information  If you are using the ACH Debit verify the American Bank Assource  Transit (Routing) / ABA Notes Account Number (up to 17)  Checking	System, please include a voic ciation Number and the Bank umber (9):	led check or a letter fi Account Number.		
Financial Institution Information Informat	System, please include a voice ciation Number and the Bank number (9): digits): Savings □  TT METHOD ONLY:  Incial institution indicated abo	led check or a letter fr Account Number.	(Explain)	

Please retain a copy of this form for your records. Return the completed form to Angela Bonaminio, ACH Coordinator, PO Box 83720, Boise, ID 83720-0091.

# FREQUENTLY ASKED QUESTIONS

For questions 1 through 7, call the appropriate state agency (listing on page 4).

- 1. How do I know when my payment is due?
- 2. When do I start using this system?
- 3. Will I be penalized for late payments?

- 4. I do not understand why I received a penalty notice.
- 5. I have questions about this late notice I received.
- 6. I do not know why I have to pay this invoice.
- 7. What is my invoice number?

#### For questions 8 through 16, call Angela Bonaminio at the Idaho State Treasurer's Office.

- 8. I called in my payment once; however, my bank was charged twice. How do I get my money back?
- 9. I called in my payment twice in error. How do I get my money back?
- 10. How do I cancel a transfer that I made in error? How do I get my money back?
- 11. My payment has been sent to the state and I cannot cancel it. How do I get my money back?
- 12. I sent my enrollment to the State Treasurer's Office. However, the system is not recognizing my ID number.
- 13. How does the system work?
- 14. I have questions about the Remittance Guide.
- 15. I don't know my password.
- 16. I made my phone call 2 weeks ago and my money has not moved.

#### **General Questions and Answers.**

- **Q:** How do I know what date to have my bank account charged?
- A: See the ACH Credit/Debit section of the Remittance Guide, page 2.
- **Q:** I need to change my banking information. What is the procedure? Where do I get the necessary forms?
- **A:** Refer to your Remittance Guide and/or call the State Treasurer's Office.
- **Q:** Does this system cost me anything?
- **A:** There is no charge from the State of Idaho. If your bank charges you, it should be less than processing a check.
- **Q:** Will I get a receipt for my payment?
- **A:** Your payment will appear on your bank statement.
- **Q:** I don't know my ID number.
- **A:** It is your Federal ID number (EIN) plus the appropriate 3-digit Idaho agency code on <u>page 4</u> of this guide.